STATE OF WISCONSIN
Department of Health and Family Services
Division of Children and Family Services

MEMO SERIES DCFS- 97-02 /ACTION February 26, 1997

e: SOCIAL SERVICES BLOCK GRANT - 1996-1997 REPLACES 95-07 96-00

To: Area Administrators/Assistant Area Administrators

Bureau/Office Directors

County Departments of Human Services Directors County Departments of Social Services Directors

Program Office Directors/Section Chiefs

From: Gerald A. Born

Administrator

Division of Supportive Living

Susan N. Dreyfus Administrator

Division of Children and Family Services

This memo supersedes DCS 95-07 DCFS 96-00 /Action entitled Social Services Block Grant - 1995 1996. It provides a summary of the federal requirements for the CY 1996-1997 Social Services Block Grant (SSBG).

The requirements are the same as in CY 1995-1996, with these exceptions:

The income eligibility standard for all Social Services Block Grant services has been revised (Attachment A) to reflect the estimated 1996-1997 median income for Wisconsin as published in the Federal Register.

Child Day Care for low-income working families, the Low Income Child Care program, is no longer funded through Community Aids. It is now funded by the Division of Economic Support with Social Services Block Grant funds as well as other state and federal funds. The Low Income Child Care program is funded in part with Social Services Block Grant funds and with other state and federal funds. In 1997, the program will become part of a single state child care program. Eligibility and co-payments for 1997 will continue as specified in Division of Economic Support Administrator's Memos #96-31 and 97-03 until modified by subsequent DES Administrator's Memo.

The 1996 1997 co-payment schedule for Child Day Care (Attachment C) remains the same as the 1995 1996 income eligibility standard.

In Section A(2) the earmarked funding for Supportive Home Care has been eliminated.

A. TYPES OF SERVICES ALLOWED OR NOT ALLOWED

DOCUMENT SUMMARY

This document provides a summary of federal and state requirements for the use of CY 1996 1997 SSBG funds.

Departments of Social Services (DSSs) and Human Services (DHSs) must adhere to the following criteria for Social Services Block Grant and Community Aids dollars.

- (1) Four Three mandated services must be provided in each county. They are state priorities.
 - -- Supportive Home Care
 - -- Child Day Care* (Low Income Child Care)
 - -- Family Planning
 - -- Specialized Transportation

*Note: The Crisis Respite Child Care funding has been folded into the Basic County Allocation for 1996 1997. Child Day Care for low- income working families, the Low Income Child Care program, is a mandated service for counties, but counties are not required to use Community Aids dollars for the program. Crisis Respite Child Care funding is part of Community Aids funding, but the program is not mandated and funds are not earmarked.

Counties will provide or arrange for Supportive Home Care, Family Planning and for Specialized Transportation. Counties must have a policy on file which describes:

- a) where people will be referred for these services, and
- b) how they will ensure that cost is not a barrier to these services.
- (2) Funds will be earmarked for Child Day Care.

The state will specify a minimum level of expenditure for each county for this service. If a county spends less than the earmarked amount in a contract year, the Department will take back the difference between the earmarked level and the level of expenditure.

(2) In addition to the four three mandated services, counties may provide any of the following standard program clusters:

Child Day Care - Crisis Respite Child Care

Community Prevention, Access and Outreach

Community Living/Support Services 1;

Investigations and Assessments;

Community Support;

Work-Related and Day Services;

Supported Employment

Community Residential Services:

Community Treatment Services;

Inpatient and Institutional Care (excluding room and board as prohibited by federal statutes):

Institution for Mental Disease.

¹ Community Living/Support Services includes "Family Planning", which is a state priority.

- (3) Child Day Care for low income working families is provided in every county using Social Service Block Grant funds and with other state and federal funds. is a state priority. with earmarked funds which counties must use to provide services. The following eligibility priorities in order of preference shall apply to the use of Low Income Child Care funds when funds are not adequate to serve all eligible families:
 - a. The parent is under age 20 and in need of child care to complete high school, VTAE school or course of study leading to declaration of high school graduation. (Note: If the parent is eligible for Learnfare, Consolidated AFDC Child Care funding should be used to the extent funds are available.)
 - b. The parent is working and a recipient of AFDC and the dependent care income disregard is less than the actual amount of the cost of child care or the dependent care income disregard is not yet available to the parent during the first two months of employment. (Note: Parents eligible for costs above the dependent care income disregard and the two months of child care prior to their access to the disregard should be funded by Consolidated AFDC Child Care funding to the extent funds are available.)
 - The parent is working and has been a recipient of AFDC within the last 12 months.
 (Note: Parents eligible for Transitional Child Care should be funded by Consolidated AFDC Child Care funding to the extent funds are available.)
 - The parent is working and has been a recipient of AFDC, but not within the last 12 months.

Also give priority within the above priority categories to very low income families (those who earn less than 50 percent of the median family income) and children with special needs in order to meet the requirements of the Federal Child Care and Development Block Grant. A child with special needs is one who has special emotional, behavioral, or physical and personal needs that require more than the usual amount of care and supervision for the child's age. This includes children with developmental disabilities. The special need must be documented by a physician, psychologist, special educator, or other qualified professional. For tribes, these priorities do not apply apply to child care which is not for crisis respite purposes. Tribes may establish priorities, eligibility criteria and payment rates, within the regulations and standards of the Federal Child Care and Development Block Grant. give priority to families with crisis respite needs within their child care allocation.

In early 1997, Low Income and other child care funding will be combined and will be fully reimbursable.

- (4) SSBG funds may not be used for:
 - a. purchase or improvement of land, or purchase, construction, or permanent improvement of any building or facility--unless the state obtains a waiver of the limitation from the Secretary of Health and Human Services;
 - subsistence during rehabilitation (except room and board provided for a short term as an integral but subordinate part of a social service or temporary emergency shelter provided as a protective service);
 - c. wages of any individual as a social service;

- d. medical care (other than family planning services, rehabilitation services, or initial detoxification of any alcoholic or drug dependent individual)unless it is an integral but subordinate part of a social service--unless the state obtains a waiver from the Secretary of Health and Human Services;
- social services (except services to an alcoholic or drug dependent individual) or rehabilitation services provided in, and by employees of, any hospital, skilled nursing facility, intermediate care facility, or prison, or to any individual living in such institution;
- f. any educational service which the state makes generally available;
- child day care services unless such services meet applicable standards of state and local law;
- h. cash payments as a service (except for those situations requiring cash noted above); or,
- I. provision of services by any individuals or entities who have committed acts of fraud or abuse under the Medicare Program or state health care programs.

B. ELIGIBILITY FOR SERVICES

- (1) For all social services the minimum state categories of eligible persons are:
 - a. Recipients of Aid to Families with Dependent Children:
 - b. Recipients of Supplemental Security Income:
 - c. Persons whose income is at or below 75% of the state's <u>1997</u> median income. (See Attachment A.)

Counties may choose to provide services to others whose incomes exceed the state minimum income test.

- (2) At their option, counties may incorporate any of the following criteria into social service eligibility policies:
 - Income eligibility <u>may</u> be set higher than levels in the table in Attachment A τ except for child care.
 - b. Liquid assets <u>may</u> be considered (for non-AFDC and SSI recipients) in determining eligibility using the following methodology:
 - I. Only assets in excess of \$5,000 for an individual or \$6,000 for a family of two or more may be considered in determining eligibility (see Attachment B).
 - ii. One-twelfth of the applicant's excess assets are added to gross monthly income; this amount is tested against the eligibility levels in the Income Eligibility Table (or a higher standard set by the county) to determine eligibility.
 - iii. If assets are considered in determining eligibility, they are also to be used in assessing fees.

(3) Targeting Policy (County Option):

Counties have the option of establishing a target group for each program. By targeting, we mean counties can identify persons with certain characteristics who will be the only persons eligible for a program (e.g., only unmarried parents can receive Counseling/Therapeutic Resources).

Child Day Care is an exception to this targeting policy.

Low Income Child Care priorities for service are established in state statutes s. <u>49.132</u> 46.98. (See item (4), pages 2 and 3 for more details.)

There shall be no eligibility test for services which are court ordered or protective in nature or for any of the following services: Crisis Respite Child Care (when provided for the purpose of preventing or remedying child abuse or neglect, alleviating stress in the family or preserving the family unit), crisis intervention, outreach, information and referral, and intake assessment.

Counties should make services available to people "most in need". If there is a probability that an individual will suffer substantial physical harm or irreparable injury without services, the counties should provide these services without an eligibility test.

C. FEES FOR SOCIAL SERVICES PROGRAMS

Statutes and Administrative Rules prohibit fee charging in some circumstances. In other situations, such as Child Day Care or Residential Service, fees are required of social service departments. (For the 1997 Child Day Care co-payment schedule, see Attachment C.) In some instances, fees may be assessed at county option, but only when the client's income exceeds state minimum eligibility guidelines. Rules governing the establishment of fee policies may be found in HSS 1. The Department's Bureau of Collections can provide listings of services which describe the fee chargeable nature of a service.

Programs which are services to a court or protective in nature <u>may</u> be exempt from fee charging at the discretion of the agency director. Court evaluations under ch. 55.06(8) are not fee chargeable. Agencies should note that an informal Attorney General's opinion has stated that custody studies and visitation studies are not services to the court and, therefore, are not exempt from fee charging.

D. FAIR HEARINGS

Fair hearing decisions will be based on this policy memo, the written policies of counties on services, administrative rules, and state law. These hearings fall within, and are governed by, Wis. Adm. Code HSS 225. A fair hearing need not be provided if the decision or an action to be reviewed arose more than 90 days prior to the request for hearing; therefore, any material furnished to clients which informs of the right to a fair hearing should contain notice of this 90-day limit.

The summary report the county provides to the Office of Administrative Hearings upon their receipt of a hearing request should include or accompany a copy of the relevant county agency's written policy.

The following four factors should be used to establish an individual's entitlement to a service:

(1) demonstration of need for the service;

- (2) eligibility based on income or AFDC/SSI status;
- evidence in the county's written policies that it intended to make this service available to the target group to which the applicant belongs; and,
- (4) there is no evidence that a waiting list for the service existed at the time of application for the service.

All four factors must be present for entitlement to exist.

This policy is in no way intended to limit the ability of counties to make available, under unusual circumstances, certain services not normally provided or to service persons whose income exceeds eligibility minimums. The agency's decision to provide services beyond those normally provided will not be considered binding, and will not form the basis for entitlement. Any agency action under this paragraph will, however, be subject to ongoing regional review to verify that such services are not provided on a routine basis.

E. REPORTING

Counties will be required to report to DCFS the actual expenditures of SSBG funds on the DMT-600 and CFS-942 (total expenses) and CFS-943 (state aids, local property taxes, and donor match). Expenditures will be reported using the Human Services Reporting System (HSRS) Standard Program Clusters and Target Groups. Instructions and forms are issued annually via the DCFS Memo Series.

(1)

ACTION SUMMARY STATEMENT:

County Departments of Social/Human Services must establish the following written policies:

- a list of social services which will be provided by the department;
- where people will be referred for Supportive Home Care, Family Planning and Specialized Transportation services, and how the counties will ensure that cost is not a barrier to these three services;
- eligibility for services (including assets and targeting, if such eligibility policies are used);
- d. a schedule of fees to be charged for social services; and,
- e. procedures to follow if a client wishes to request a fair hearing.

These policies must be kept on file and made available to the public.

Counties will be required to report on services provided and actual expenditures on the Human Services Reporting System (HSRS), DMT-600 and CFS-942 (total expenses) and CFS-943 (2) (state aids, local property taxes, and donor match).

CENTRAL OFFICE CONTACT:

Richard Kiley Bureau of Management and Operations (608) 266-7336

Attachments

County Departments of Community Programs Directors СС County Departments of Developmental Disabilities Services Directors DSS/DHS Child Care Coordinators Tribal Chairpersons/Human Services Facilitators

bcc DCS File(s) 1

By Rich Kiley (BMO/6-7336) JESSBG.DOC

Attachment A

STATE INCOME ELIGIBILITY FOR SSBG SERVICES

1997 Income Eligibility Schedule for All Social Services

FAMILY SIZE	YEARLY	MONTHLY
1	\$19,103	\$1,592
2	24,981	2,082
3	30,859	2,572
4	36,737	3,061
5	42,614	3,551
6	48,492	4,041
7	49,594	4,133
8	50,696	4,225
9	51,798	4,317
10	52,901	4,408

Gross monthly family income is defined as: money, wages or salary, net income from farm or non-farm self-employment, social security, dividends, interest (on savings or bonds), income from estates or trusts net rental income, royalties, public assistance or welfare payments, pensions and annuities, unemployment compensation, workers compensation, alimony, child support, and veterans' pensions. Funds or benefits not specified here are excluded from consideration as income. During service intake, persons need only declare their gross family income.

Attachment B

Assets are defined as "cash on hand" or in the bank. This includes savings accounts, certificates of deposit (regardless of due date), money market certificates and funds, checking accounts, IRAs, and the cash value of stocks and bonds. Excluded from assets consideration are \$5,000 for an individual or \$6,000 for a family of two or more.